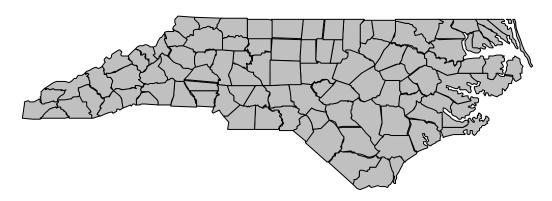
### North Carolina Department of Health and Human Services Division of Mental Health, Developmental Disabilities and Substance Abuse Services

### **NC-TOPPS**

North Carolina Treatment Outcomes and Program Performance System

# Child Mental Health Consumers (Ages 6-11) Catawba (Mental Health Partners) LME

# Initial Interviews July 1, 2007 through June 30, 2008



Data Collected By: Center for Urban Affairs and Community Services (CUACS)

NC State University

Report Produced By: Institute for Community-Based Research

National Development & Research Institutes, Inc. (NDRI)

Prepared For: Quality Management Team

Community Policy Management Section

DMH/DD/SAS NC DHHS

July 2008







# **Child (6-11) Mental Health Introduction to NC-TOPPS Report**

#### Introduction

This report is available to Local Management Entities, providers and the NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services on data gathered for mental health consumers through the North Carolina Treatment Outcomes and Program Performance System (NC-TOPPS). This report provides information gathered through the online NC-TOPPS Initial Interview and includes six pages of charts, tables and text information on mental health consumers' demographic characteristics, symptoms, behaviors and activities, service needs, supports and barriers, family and housing issues and outcome measures collected through an interview with the consumer's guardian at the beginning of their treatment. It should be noted that not every data element or response category on the NC-TOPPS Initial Interview is displayed in this report.

Please note that the charts and tables may not always match online queries that you may conduct. The data used in these reports will not necessarily reflect the same points in time. In addition, NDRI who produces these reports cleans the data and removes apparent duplicates prior to preparing the tables and charts.

Additional information about NC-TOPPS including printable interviews can be found at <a href="http://www.ncdhhs.gov/mhddsas/nc-topps/">http://www.ncdhhs.gov/mhddsas/nc-topps/</a>

#### **General Information on Interpreting Tables**

#### **Types of Statistics**

- ► A <u>count</u> shows the actual number (often designated by the letter "n") of clients.
- ► A <u>percentage</u> is the number of clients with a characteristic or behavior divided by all the clients in the group of interest multiplied by 100. Percentages will be designated with a % sign next to the number.
- ► An <u>average</u> is the sum of a set of numbers divided by the number of numbers in the set. When a number in a cell is an average, the word average will appear in the row descriptor.
- ▶ A <u>median</u> is the middle number in a set of numbers, arranged from lowest to highest. For example, the median for the following numbers: 9, 12, 12, 15, 17, 20, **22**, 23, 25, 28, 31, 35, 62 is the bolded number, 22. Medians are important measures of central tendency, especially when a mean may be skewed by a very high or very low value. When a number in a cell is a median, the word median will appear in the row descriptor.

#### **Missing Data**

For many of the NC-TOPPS forms received, a particular item or question may have been left blank. In calculating the means, medians, and percentages in cells of questionnaire items, this missing data is excluded from the calculation. For example, program X may have submitted 50 assessments but in 2 of the assessments, gender was left blank. When the percent of males is calculated, the 25 males are shown as 52% (25/48\*100).

#### **Denominators**

The denominator for nearly all percentages is the number of cases shown at the bottom on the page minus item missing data. All exceptions to this general rule are noted with appropriate text in the graphic or table. This text will state which group is included or excluded from the denominator, such as "of those enrolled in K-12." In sections with "by groups" such as by age, the demoninator is the age group noted.

#### **Multiple Response**

"Multiple response" indicates a "mark all that apply" type question in which more than one response to a question is allowed. The total of responses may add to greater than 100%. Examples are health insurance or target population. This is in contrast to items such as gender where only a single response is allowed.

#### **Definition of terms**

The Appendix at the end of the report gives definitions of acronymns, abbreviations, and other terms used in this report.

#### Special notes:

none



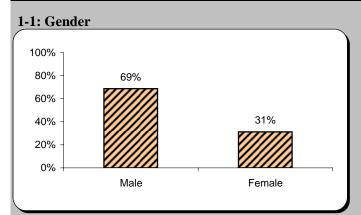
### Initial Assessments Received July 1, 2007 through June 30, 2008 Child (6-11) Mental Health Consumers by Provider Catawba (Mental Health Partners)

This table shows the number of consumers in this report by provider/provider location.

Provider	City	ProviderID	Number
A Caring Alternative	Morganton	2161	16
A Caring Alternative	Morganton	2584	11
Alexander Youth Network	Lenoir	2185	3
Alexander Youth Network	Morganton	2184	1
Burke County Public			
Schools	Morganton	2157	14
CNC/Access	Hickory	1674	3
CNC/Access	Morganton	2183	2
Cleveland Family Services	Shelby	1408	2
Family NET	Newton	513	12
Family NET of Catawba			
County	Hickory	221	45
HomeCare Management			
Corporation	Lenoir	1062	11
Litehouse, Inc.	Hickory	2593	3
Mountain Area Community			
Services, Inc.	Marion	2235	2
Quality Mental Health, Inc.	Lenoir	2190	3
Quality Mental Health, Inc.	Morganton	1770	1
Quality Mental Health, Inc.	Morganton	2189	16
Skill Creations, Inc.	Lenoir	1082	1
	Morganton	2159	1
Universal MH/DD/SAS	Morganton	2236	15
Wilson's Professional Care,			
LLC	High Point	2808	1
Total			163



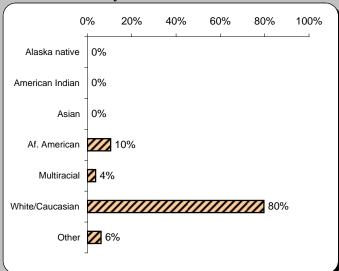
### Initial Interviews Received July 1, 2007 through June 30, 2008 Child (6-11) Mental Health Consumer Characteristics Catawba (Mental Health Partners)



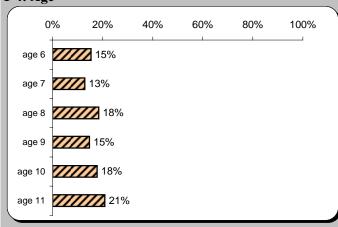
#### 1-2: Hispanic Origin

Of the Catawba (MHP) consumers, 7% indicate that they are of Hispanic, Latino, or Spanish origin.

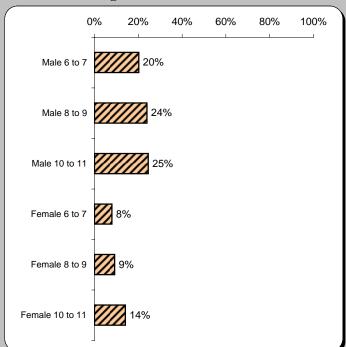
#### 1-3: Race/Ethnicity



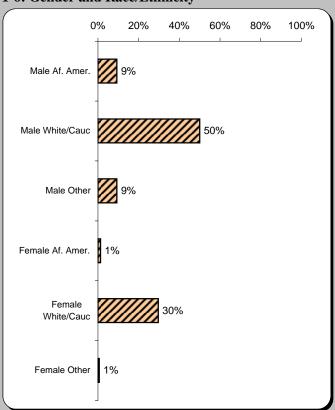
#### 1-4: Age



#### 1-5: Gender and Age

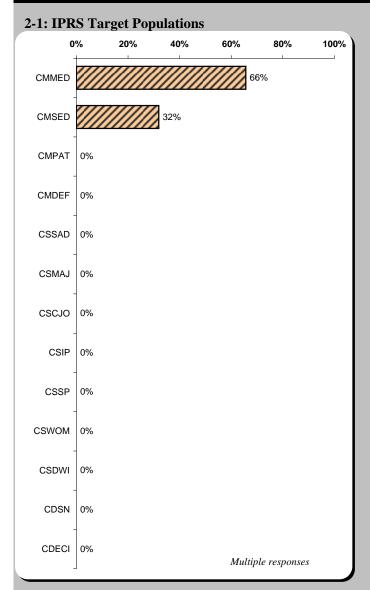


#### 1-6: Gender and Race/Ethnicity

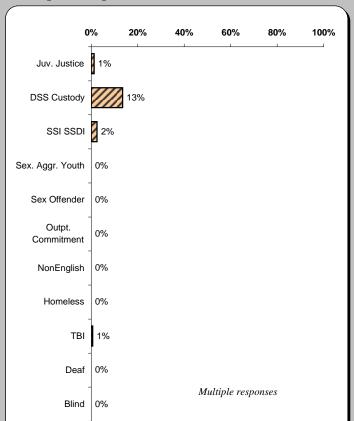




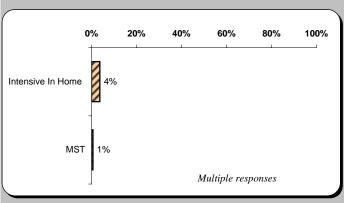
Initial Interviews Received July 1, 2007 through June 30, 2008 Child (6-11) Mental Health Target and Special Populations and Programs Catawba (Mental Health Partners)



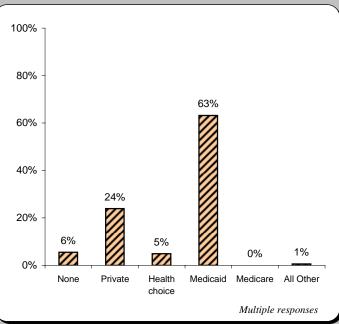
#### 2-3: Special Populations



### 2-2: Special Programs



#### 2-4: Health Insurance

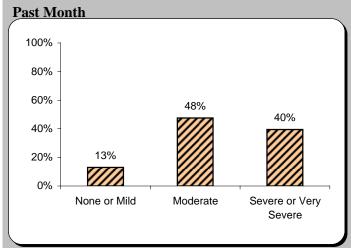


Note: Refer to appendix for acronym definitions for all charts on this page.



### Initial Interviews Received July 1, 2007 through June 30, 2008 Child (6-11) Mental Health: Symptoms, Behaviors, Diagnoses, and Justice Involvement Catawba (Mental Health Partners)

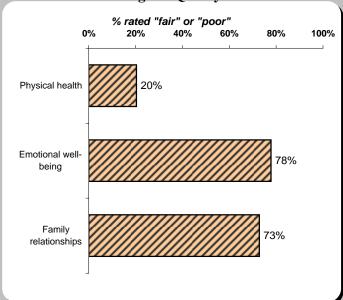
#### 3-1: Severity of Mental Health Symptoms,



#### 3-2: General Assessment of Functioning (GAF)

GAF scores were reported for 99% of Catawba (MHP) consumers. The average score was 48.1 and the median score was 50.

#### 3-3: Consumer Ratings on Quality of Life



#### 3-4: History of Abuse

Physically Abused, past 3 months	26%
Sexually Abused, ever	8%
Sexually Abused, past 3 months	1%

#### 3-5: DSM-IV Diagnoses

Diagnostic Category	%
Attention deficit disorder	52%
Oppositional defiant disorder	27%
Adjustment disorder(s)	27%
Disruptive behavior	18%
PTSD	12%
Bipolar disorder	6%
Anxiety disorder	8%
Learning disorder(s)	6%

<sup>\*</sup> Only most commonly diagnosed conditions shown.

#### 3-6: Lifetime Use of Substances

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Ever used tobacco or alcohol	0%
Ever used other illicit drugs	0%

#### 3-7: Lifetime Suicide Attempts

2% of Catawba (MHP) consumers have attempted suicide at least once during their lifetime.

## **3-8: Behavior Problems and Symptoms Expressed,** Past 3 Months

	%
Suicidal thoughts	29%
Tried to hurt or cause self pain	23%
Hit/physically hurt another person	56%

#### 3-9: Trouble with the Law, Past 6 Months

3% of Catawba (MHP) children had some trouble with the law in the 6 months before entering treatment.

#### 3-10: Justice Involvement

Among Catawba (MHP) child consumers, 2% are currently under juvenile justice supervision while 3% have been required by the courts or juvenile justice system to enter treatment.

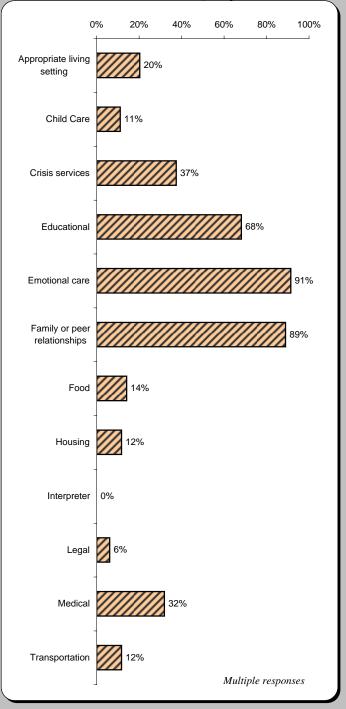


# Initial Interviews Received July 1, 2007 through June 30, 2008 Child (6-11) Mental Health: Service Needs and Health Care Catawba (Mental Health Partners)

#### 4-1: Public or Private Health Care Provider

Among Catawba (MHP) consumers, 96% report that they have a health care provider and 94% have seen their provider within the past year.

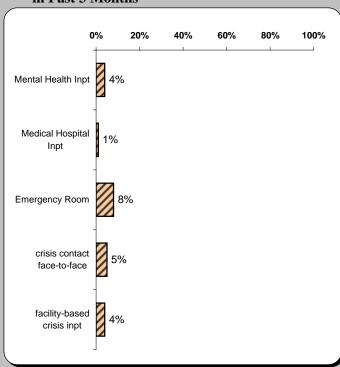
4-2: Service Needs Rated "Very Important"



#### 4-4: Lifetime Admission for Inpatient Mental Health

10% of Catawba (MHP) consumers have had inpatient mental health admissions.

# 4-5: Health Care: Types of Service Utilized in Past 3 Months



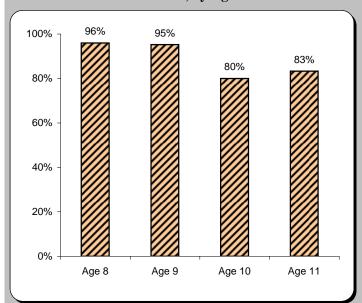


# Initial Interviews Received July 1, 2007 through June 30, 2008 Child (6-11) Mental Health: Education and Other Activities Catawba (Mental Health Partners)

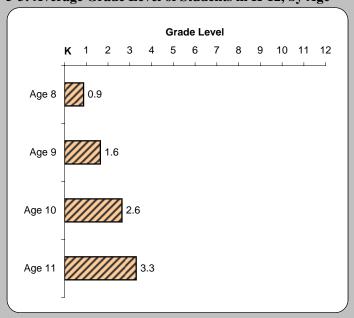
#### 5-1: Enrollment in Academic Programs

Enrolled in	
Any Academic program	96%
Academic Schools (K-12)	90%
Alternative Learning Program (ALP)	7%
Note: Multiple response.	

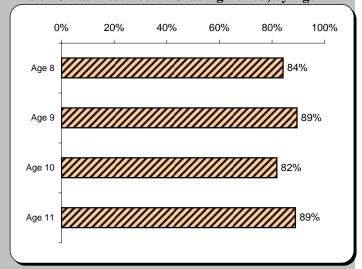
#### 5-2: K-12 School Attendance, by Age



#### 5-3: Average Grade Level of Students in K-12, by Age



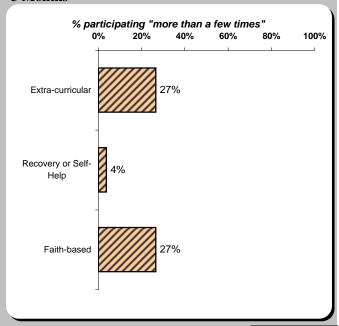
## 5-4: Students in K-12 who Received Mostly A's, B's or C's at Most Recent Grading Period, by Age



## 5-5: School Suspension, Explusion, and Truancy, Past 3 Months

Of those enrolled in K-12, percent who missed school due to	
Expulsion	0%
Out-of-school suspension	12%
Truancy	1%

## **5-6:** Consumer Participation in Positive Activities, Past 3 Months





# Initial Interviews Received July 1, 2007 through June 30, 2008 Child (6-11) Mental Health: Family and Living Situation Catawba (Mental Health Partners)

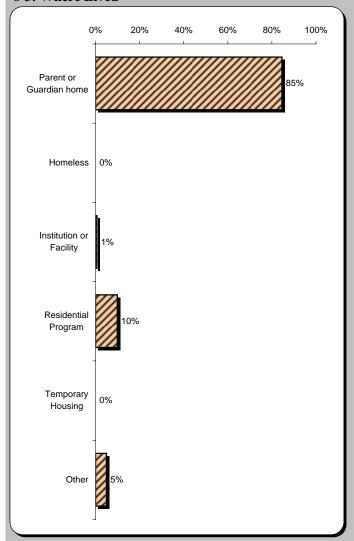
6-1: Primary Caregiver

· · ·	
Parent(s)	66%
Grandparent(s)	16%
Sibling(s)	0%
Foster parent(s)	15%
Other relative	1%
Other	1%

#### 6-2: Adult Role Model

Among Catawba (MHP) consumers, 99% have at least one adult positive role model.

#### 6-3: Where Lived



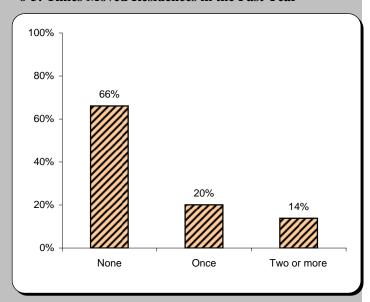
#### 6-4: Numbers living in special circumstances

0
0
3
12
1
0
0
0
1

#### Note about those in home community:

The number of children living in the special residential and other cirumstances shown above total 17. Of these, 5 live in facilities, centers, and places in their home community.

#### 6-5: Times Moved Residences in the Past Year





### Appendix Child (Age 6-11) Mental Health Acronyms and Abbreviations

Acronym or Term	Definition
ACT	Assertive Community Treatment
Af American	African American
AOD	Alcohol or other drugs
CDECI	Target population: Early childhood intervention
CDSN	Target population: Child with Developmental Disability
CMDEF	Target population: Child MH consumer who is deaf or hard of hearing
CSDWI	Target population: Child SA consumer who is receiving DWI Offender Treatment
CMMED	Target population: Child who is Seriously Emotionally Disturbed
CMPAT	Target population: Child MH consumer who is homeless (PATH program)
	Target population: Child who is Seriously Emotionally Disturbed with out of home
CMSED	placement
CSCJO	Target population: Child SA consumer who is a Criminal Justice Offender
CSIP	Target population: Child receiving indicated SA prevention services
CSMAJ	Target population: Child SA consumer in the MAJORS SA/JJ Program
CSSAD	Target population: Child with Substance Abuse Disorder
CSSP	Target population: Child receiving selected SA prevention services
CSWOM	Target population: Child SA consumer who is pregnant or has dependent children
Cauc.	Caucasian
Crim. Justice	Criminal Justice
Cl	Criminal Justice
DSM	Diagnostic and Statistical Manual (Edition IV)
DSS	Division of Social Services
DWI	Driving while Impaired
GED	General Education Diploma (High School Equivalency)
Inpt	Inpatient
JJ	Juvenile justice
Juv. Justice	Juvenile justice
Med. Mgmt.	psychiatric medication management
MH	Mental Health
Outpt. Commitment	Outpatient Commitment
PSR	Psychosocial rehabilitation
PTSD	Post-traumatic Stress disorder
SA	Substance Abuse
SSI/SSDI	Supplemental Security Income or Social Secuity Disability Insurance
TBI	Traumatic brain injury